

CHOICES

NEWSLETTER

BlueCare Tennessee CHOICES Program

MAY 2017

Ensure Your Policies and Procedures for Hiring Meet Federal and State Standards

All CHOICES and ECF CHOICES providers must have policies and procedures in place to conduct, in accordance with Federal and State law and rule and TennCare policy, criminal background checks, which shall include a check of the Tennessee Abuse Registry, Tennessee Felony Offender Registry, National and Tennessee Sexual Offender Registry, and List of Excluded Individuals/Entities (LEIE), on all prospective employees who will deliver CHOICES or ECF CHOICES HCBS and to document these in the worker's employment record.

Additionally, providers must have completed background checks on each employee who will provide direct support services to CHOICES and ECF CHOICES members prior to the worker providing services.

Providers shall have a policy and process in place for conducting an individualized assessment for workers whose criminal background check reveals past criminal conduct.

The listing of offenses noted in the consumer directed information within this article could disqualify a potential employee, but do not automatically disqualify the person.

Providers cannot have a blanket policy to exclude people with a criminal background from employment. The same applies for CHOICES/ECF CHOICES members in the Consumer Direction program because they serve as the employer of record.

However, Consumer Direction providers cannot employ anyone whose name appears on the abuse registry or is on the list of excluded providers (LEIE).

Providers must conduct an individualized assessment based on the three factors relating to nature of work to be performed, nature and gravity of offense, and time when offense was committed.

For example, a person who has a DUI conviction from six years ago and will not transport members should be assessed differently than someone with multiple felony convictions for violent acts over the past five years who is being considered for a job that provides direct support to a member.

Background Check Clarification regarding Hands on HCBS Services

The Contract Risk Agreement (CRA) requires that providers perform background checks on individuals who will be providing direct support to members. Direct support means hands-on care, and would exclude, for example, providers like pest control. Similarly, volunteers who provide home-delivered meals should not be subject to these background check requirements.

ECF CHOICES Claims Reference Guide Available Online

If you have questions or need information about billing guidelines, common denials, appeals, timely filing, or other any other claims issues, you can find the answers online in the [ECF CHOICES Claims Reference Guide at bluecare.bcbst.com](http://bluecare.bcbst.com).

Guidelines and Resources for Filing CHOICES and Employment Community First (ECF) CHOICES Claims

The BlueCare Tennessee Support Coordinator is responsible for completing the Person Centered Support Plan (PCSP). Once approved, it allows CHOICES and CHOICES ECF providers to submit claims.

The PCSP and/or authorization details the services and number of units or dollars to be provided, date period, name of provider, and billing code with modifiers. Some services will not have modifiers identified and will require providers to review both the PCSP and the authorization. When applicable, ECF CHOICES providers should use the current ECF CHOICES Rate Grid to determine the correct modifier(s).

If the services provided do not meet the definition and parameters of the services approved on the PCSP, the provider must contact BlueCare Tennessee.

If you have questions about claims, the following contacts can provide you with specific answers:

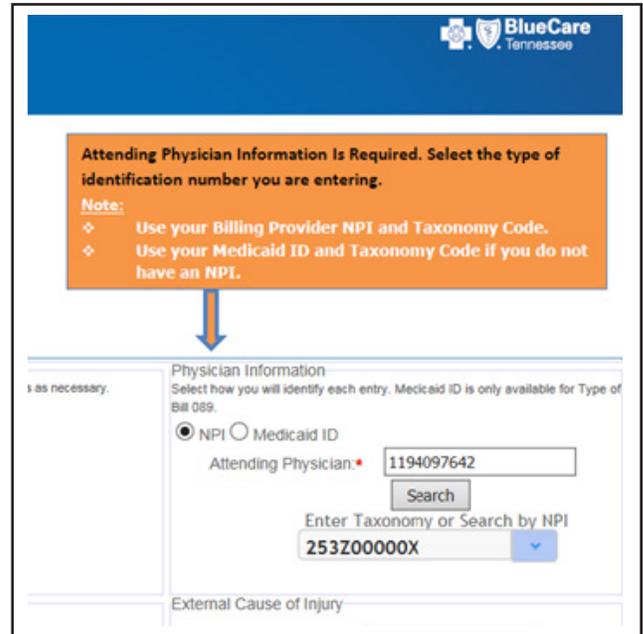
- **EVV Billing ; EVV Missed Visits; Timesheets; Tablets** – ProviderAuthIssues@bcbst.com
- **Employment Outcome-Based Forms** – Employment_reports@bcbst.com
- **Customer Service; Claims Research** – 1-888-747-8955
- **eBusiness; Web Portal** – 1-800-924-7141 or (423) 535-5717, option 2 or log-in to Blue Access - www.bcbst.com

To receive payment for your services, please make sure:

- The services are identified on an approved PCSP.
- The service is authorized and may then be billed through the Electronic Visit Verification (EVV) database, or if non-EVV services, through the BlueCare Tennessee Web Portal. Claims deny if no authorization exists in the database or if a code other than the approved code is billed. (Only Personal Assistance, Respite, Supportive Home Care are EVV services.)
- Your agency supplied the service.
- To submit claims within 120 days of date of service.

Tips for Claims Submission in the Provider Web Portal

When you submit claims using the BlueCare Tennessee Web Portal, make sure to include the Attending Physician Information (as shown below). This step will help you avoid a claim rejection on the front end for: 130032 CLM ATTENDING NPI MISSING/INVALID.



Billing Tips for ECF CHOICES Community Transportation Using Code T2002

Code T2002 is for non-emergency transportation and applies to ECF CHOICES Community Transportation. Reimbursement for this service is a per diem fee and is limited to once per day. Each date of service should be billed on a separate line on the claim unless the service was provided on consecutive days to ensure proper reimbursement.

Examples

| | |
|---|--|
| Member received services every day Jan. 1 – 15 | Bill the claim with one line item for 1/1/17-1/15/17 with 15 units of service. |
| Member received services Feb. 1, Feb. 5 and Feb. 10 | Bill claim with one line for each date of service with one unit of service, for a total of three lines. |
| Member received services Mar. 1, Mar. 2 and Mar. 5 | Bill claim billed with two lines. One line for 3/1/17-3/2/17 with two service units and one line for 3/5/17 with one service unit. |



Background Check Requirements for Consumer Directed Services

The provision of Consumer Directed services shall begin as soon as possible, but not longer than 60 days from the date of the referral.

Prior to beginning the provision of Consumer Directed services, the Fiscal Employer Agent (FEA) shall notify BlueCare Tennessee that all requirements have been fulfilled, including verification of all worker qualifications, criminal background checks, signed service agreements, and that the member is ready to begin consumer direction of eligible CHOICES HCBS or eligible ECF CHOICES HCBS.

As prescribed in the FEA's contract with TennCare, the FEA shall ensure that workers meet all requirements prior to the worker providing services.

The FEA shall ensure that workers: meet all TennCare established requirements for providers of comparable, non-Consumer Directed services; complete a background check which includes criminal background check (including fingerprinting), or, as an alternative, a background check from a licensed private investigation company, verification that the person's name does not appear on the State abuse registry, verification that the person's name does not appear on the state and national sexual offender registries and licensure verification, as applicable; and has completed all required training.

A member cannot waive a background check for a potential worker. A background check may reveal a potential worker's past criminal conduct that may pose an unacceptable risk to the member.

The following findings may place the member at risk and may disqualify a person from serving as a worker:

- Conviction of an offense involving physical, sexual or emotional abuse, neglect, financial exploitation or misuse of funds, misappropriation of property, theft from any person, violence against any person, or manufacture, sale, possession or distribution of any drug; and
 - Entering of a plea of nolo contendere or when a jury verdict of guilty is rendered but adjudication of guilt is withheld with respect to a crime reasonably related to the nature of the position sought or held.
- If a potential worker's background check includes past criminal conduct, the member must review the past criminal conduct with the help of the FEA. The member, with the assistance of the FEA, will consider the following factors:
 - Whether or not the evidence gathered during the potential worker's individualized assessment shows that the criminal conduct is related to the job in such a way that could place the member at-risk;
 - The nature and gravity of the offense or conduct, such as whether the offense is related to physical or sexual or emotional abuse of another person, if the offense involves violence against another person or the manufacture, sale or distribution of drugs; and;
 - The time that has passed since the offense or conduct and/or completion of the sentence;
 - After considering the above factors and any other evidence submitted by the potential worker, the member must decide whether to hire the potential worker.
 - If a member decides to hire the potential worker, the FEA shall assist the member in notifying the Contractor of this decision and shall collaborate with the Contractor to amend the member's risk agreement for CHOICES members to reflect that the member voluntarily chose to take on the risk associated with hiring an individual with a criminal history and is solely responsible for any negative consequences stemming from that decision, or collaborate on a risk mitigation strategy for ECF CHOICES members.



Home and Community Based Services Providers

Developing the PCSP

The person-centered support plan (PCSP) for people in Medicaid HCBS programs must be developed through a person-centered planning process. The plan identifies the strengths, preferences, needs (clinical and support), goals and outcomes of an individual. **It involves what is important TO the person in addition to what is important FOR the person.** It touches on non-clinical areas including relationships, community life inclusion, competitive employment, finances, wellness, education and other areas, to the same degrees of access as individuals not receiving HCBS services.

The PCSP is driven by the individual and reflects the person's perspective and can include people chosen by the individual. When the plan is created, the individual can decide when and where the plan will be conducted that is convenient for the individual. The PCSP is reviewed and revised annually with functional needs assessments, or when circumstances or needs change, or at the request of the individual.

Provider Responsibility

BlueCare Tennessee began implementing the new PCSP to all newly enrolling HCBS members in the CHOICES program Apr. 1, 2017. All current members will transition from an existing Plan of Care (POC) to a new Person-Centered Support Plan (PCSP) at some point during the year.

Providers will continue to receive the plans via fax or e-mail and be responsible for attesting to receipt with the Member Associate in the BlueCare Tennessee Operations Team, or via the Sandata EVV database.

More importantly, providers are required to train Direct Support Professionals (DSP), or any people that will be serving individuals who receive hands-on HCBS services. Ensure all staff impacted by the new PCSP is aware of these changes. HCBS providers will receive a prototype via email of the PCSP, and an invitation to participate in a training session. If you have questions regarding the new PCSP, contact your assigned regional Network Manager.

Person-Centered Planning includes:

- Cultural considerations that are incorporated in the plan.
- Strategies for solving disagreements within the planning process
- Choices regarding services and providers to ensure individuals have informed choices
- A plan for individuals to request updates when necessary
- Risk factors and mitigation strategies documented
- Backup plans for paid and unpaid support
- Individualized modifications to settings requirements
- Important individual names and contact information
- Responsible individuals
- Informed consent
- Signatures of individual and providers
- Opportunities to seek competitive employment and work in integrated settings
- Opportunities to engage in community life, and control personal resource
- Signed documentation, with copies for the individual and representatives, and providers
- Include services the person elects to self-direct (as applicable)

Note: *The service plan must not include services that the person does not need or are not appropriate to support the person.*



Key Pre-Employment Training Points for Employment and Community First CHOICES Services

Exploration is a time to educate members and their families on Supported Employment, and talk openly about why there might be apprehension to seek integrated employment. This service also contains 4-5 employer experiences, where the member visits employers to job shadow, interview and tour.

Discovery is not about visiting employers. It's about conducting many interviews with members, family, natural supports and friends. This is followed by observation of the member handling familiar activities in familiar locations, such as babysitting, mowing lawns or doing laundry; while only one experience is in an unfamiliar location doing an unfamiliar activity.

Situational Observation and Assessment is the opportunity for the member to volunteer with an employer to try out a job and determine if that kind of employment is a good fit. For example, learning that a job at a pet daycare involves cleaning floors and not playing fetch is good for the member to know before being hired. Unless a member regularly volunteers somewhere, this is the only service where a member should be doing hands-on work.

For additional assistance, please contact Naveh Eldar
Naveh_Eldar@bcbst.com



How Are We Doing?

As a valued BlueCare Tennessee provider, we welcome your feedback and would like to hear from you. If there are questions and/or concerns regarding a process or if there is an individual that you'd like to give "kudos" please submit them to CHOICESProviderRelations@bcbst.com.

We look forward to hearing from you.

CHOICES Provider Network Managers

| Manager | Region | Phone | Email |
|-------------------|--------------|----------------|-----------------------------|
| Jonathan Miller | East Tenn. | (423) 854-6001 | jonathan_miller@bcbst.com |
| Thurston Stephens | Middle Tenn. | (615) 565-1907 | thurston_stephens@bcbst.com |
| Mark Watson | Middle Tenn. | (615) 565-1937 | mark_watson@bcbst.com |
| Ashley Hill | West Tenn. | (901) 544-2136 | ashley_hill@bcbst.com |

ECF CHOICES Provider Network Managers

| Manager | Region | Phone | Email |
|---------------------------|--------------|----------------|---------------------------|
| Jonathan Miller (Interim) | East Tenn. | (423) 854-6001 | jonathan_miller@bcbst.com |
| Vivian Williams | West Tenn. | (901) 544-2484 | vivian_williams@bcbst.com |
| Keshanna Brents | Middle Tenn. | (615) 760-8792 | keshanna_brents@bcbst.com |